

State of West Virginia

Campaign Financial Statement for Elections in 2012

For political committees, list the current election year. For candidates, list the current campaign or the year of an open past campaign.
 Supply all information requested. It is required by WV Code §3-8-5a.

<i>Democratic Ex. Committee</i>		<i>Ade L. Riggs</i>	
Candidate or Committee Name		Candidate or Committee's Treasurer	
		<i>Rt#2 Box 12113</i>	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box)	
		<i>Harrisville, WV 26362</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code	Daytime Phone #

Reporting Period (check one)

- | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> First Primary or Annual Report
(Due last Saturday in March or within 15 days thereafter) | <input type="checkbox"/> Pre-primary Report
(Due 7 to 10 days before primary election) | <input checked="" type="checkbox"/> Post-primary Report
(Due 25 to 30 days after primary election) |
| <input type="checkbox"/> First General Report
(Due last Saturday in September or within 15 days thereafter preceding general election) | <input type="checkbox"/> Pre-general Report
(Due 7 to 10 days before general or special election) | <input type="checkbox"/> Post-general Report
(Due 25 to 30 days after general or special election) |

and no loans or outstanding bills. Political Action Committees must

I forgot to get new forms. When I found out I didn't - it was too late to get them as the report was due

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come, in-kind contributions, loans, expenditures, unpaid bills.

Column A reporting period	Column B: Election Cycle-to-Date Add Col. A to last report's Col. B

9. Loan Repayment - Schedule 1B	
10. TOTAL EXPENDITURES (Add lines 8 and 9)	

CASH BALANCE SUMMARY

11. Beginning Balance (From previous report)	<i>1094.25</i>	16. Outstanding Loans - 1B	<i>0</i>
12. Total Receipts (Add lines 3 and 6, Column A)		17. Unpaid Bills 3B	<i>0</i>
13. Subtotal (Add lines 11 and 12, Column A)		18. Total Debts (Add lines 16 and 17)	<i>0</i>
14. Total Expenditures (Line 10, Column A)			
15. Ending Balance (Subtract line 14 from line 13)	<i>1094.25</i>		

Note: The ending balance can't be a negative number. If you have a question about this, see General Instructions, Page 6 under Cash Balance Summary. The ending balance will be the beginning balance on your next report.

SCHEDULE 1A

**CONTRIBUTIONS
OVER \$250.00**

(For information about contributions, see General Instructions, Page 3.)

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME <i>By law, you must report an individual contributor's occupation and business affiliation. For a committee, you must report the affiliation (the group, association, corporation, or union with which it is connected.)</i>	AMOUNT
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
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	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	

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OF THIS PAGE AS YOU NEED**

Subtotal contributions of more than \$250.00

Subtotal contributions of \$250.00 or less

(Enter Total on Page 1, line 1, Col. A) Total

0
0
0

SCHEDULE 3A

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

(For information, see General Instructions, Page 4.)

Date	Source of Income	Type of Receipt	Amount

(Enter Total on Page 1, line 4, Col. A.) **Total**

0

SCHEDULE 4A

IN-KIND CONTRIBUTIONS

(For information, see General instructions, Page 4.)

Date	Full name, address, occupation and place where works (if total contributions by individual or committee are more than \$250.00)	Description of contribution	Value (amount)

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(Enter Total on Page 1, line 7, Col. A.) **Total**

0

